

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	SO	75.3/6	9/12/00
O.I.P.E. CLASSIFIER			7-18-00
FORMALITY REVIEW	AS	551	8-17-00
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Final Original	
1	12-12-04
2	✓
3	✓
4	✓
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Claim	Date
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Best Available Copy

If more than 150 claims or 10 actions  
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